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PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 Application or Docket Number											amber
		OI 41140 40	- CH - CO	04074	•						
l	CLAIMS AS FILED - PART I				_	SMALL ENTITY		OR	OTHER THAN		
(Column 1) (Column 2)					SMALL	ENIIIT		SMALL	ENTITY		
FOR ROMB			ER FILED	NUMB	ER EXTRA		RATE	FEE		RATE	FEE
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INDEPENDENT CLAIMS		WS				1					
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MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))							+1_0		OR	+5=	
* If the difference in column 1 is less than zero, enter *0* in column 2.							TOTAL		OR	TOTAL	
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CLAIMS AS AMENDED - PART II 0 140/											
(Column 1) (Column 2) (Column 3)						L	φ_{α}	-	OR		R THAN
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AM	STORE STORES						^ •		OR-	X \$=	
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9	(37 CFR 1.18(c)) Independent	•	0.61	•••			× \$=		OR	X \$=	
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B	FIRST PRESENT	ATION OF MIN TIPE	DEPENDS	NT CLAIM MTCS	R 1 18(6)						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))							+\$ =		OR	+ 8 =	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											
"" If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20". """ If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

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